Emergency Pesticide Use Notification

To: Parents/guardians of stud	ents, and staff of [insert name of sc	hool]
From: The School IPM Coordinator:		Phone Number:
This notice is to advise you th	at the following pesticides were use	ed at [insert name of school]:
Pesticide Common Name	Pesticide Trade Name	EPA Registration Number
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Location of the pesticide app	olication:	
Reason for the pesticide app	lication:	
The Date and Time the indo	or or outdoor application took pla	ace:
DATE TIME		
If applicable, description of future:	lent or staff member:steps to be taken to avoid emerge	ncy use of pesticides for this problem in the
Description of the possible a the pesticide(s) to be used, if	•	s per the Material Safety Data Sheets for
Pesticide product label instr	uctions and precautions related to	public safety:

Note: as required by law, we are advising you of the following statement:

The Office of Pesticide Programs of the United States Environmental Protection Agency has stated: "Where possible, persons who potentially are sensitive, such as pregnant women, infants, and children, should avoid any unnecessary pesticide exposure."